

5-2-08
Friday 5:20 PM

Issuing Officer [Redacted]		Nye County Sheriff's Office State of Nevada Revision Date January 22, 2003		Accident Number: Event Number	
<input type="checkbox"/> Juvenile		Traffic Misdemeanor Citation/Complaint		<input type="checkbox"/> Evidence Logged <input type="checkbox"/> Arrest	
<input checked="" type="checkbox"/> Traffic <input type="checkbox"/> Accident		<input type="checkbox"/> School Zone <input type="checkbox"/> Hazmat		<input type="checkbox"/> Aircraft Clock # _____	
<input type="checkbox"/> Non-Traffic <input type="checkbox"/> Warning		<input type="checkbox"/> Construction Zone <input type="checkbox"/> S.T.E.P.		<input type="checkbox"/> Radar <input type="checkbox"/> Other	
<input type="checkbox"/> Parking Meter # _____		<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural		Explain:	
Travel Direction: North: <input type="checkbox"/> South: <input checked="" type="checkbox"/> East: <input type="checkbox"/> West: <input type="checkbox"/>		Beat/Area: <u>R2</u> Mile Marker: <u>N</u>			
At Location: <u>PUR, MT CHARLESTON</u>					
Weather Conditions: <u>Clear</u> Road Conditions: <u>ASPHALT</u> Traffic: <u>Light</u>					
Violation Date: <u>05-02-08</u> Time: <u>1720</u> Day Code: <u>6</u>					
Issue Date: <u>05-2-08</u> Time: <u>1722</u>		Defendant's Phone # [Redacted]			
Defendant Type:		Had Been Drinking: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> Unk: <input type="checkbox"/>			
Driver: <input checked="" type="checkbox"/> Passenger: <input type="checkbox"/> Pedestrian: <input type="checkbox"/> Other: <input type="checkbox"/>		Test Type: PBT: <input type="checkbox"/> Blood: <input type="checkbox"/> Breath: <input type="checkbox"/> UA: <input type="checkbox"/>			
Explain Other:		Drugs Suspected: <input type="checkbox"/> Results: _____ %			
THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF NEVADA, CITY/COUNTY: <u>NYE</u>					
Name (Last, First, Middle) <u>BRUNET, MICHAEL CHARLES</u>					
Address: Physical: <input checked="" type="checkbox"/> Mailing: <input type="checkbox"/>		City: <u>PAHRUMP NV</u> State: <u>NV</u> Zip: <u>89060 US</u> Ctry: <u>US</u>			
<u>1741 E. FALCON</u>					
DOB: <u>07-14-67</u>		Race: <u>L</u> Sex: <u>M</u> Ht: <u>507</u> Wt: <u>150</u> Hair: <u>Bru</u> Eyes: <u>Blue</u>			
<input checked="" type="checkbox"/> OLN/ID: [Redacted] CDL: <input type="checkbox"/>		State: <u>NV</u> Class: <u>C</u> Expiration: <u>7-14-09</u> Restrictions: _____ Endorsements: _____			
Vehicle has current proof of insurance Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/>		Expiration Date of Insurance Card: <u>8-08</u>			
DID OPERATE THE FOLLOWING VEHICLE / MOTOR VEHICLE AT THE ABOVE LISTED LOCATION:					
Commercial Vehicle: <input type="checkbox"/>		US DOT#: _____ VIN #: _____			
Vehicle License: _____ Lic State: <u>NV</u> Expiration: _____ Year: <u>1</u> Make: _____ Model: _____ Type: _____ Color: _____					
Registered Owner: <input checked="" type="checkbox"/> Same <input type="checkbox"/> Other		Address: _____			
DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):					
1. Violation <u>484.361.3</u> NOC <u>01027</u> <input checked="" type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Township Code					
Description: <u>SPEED 1-10</u>		Posted Speed: <u>35</u> Actual Speed: <u>43</u> Cited Speed: <u>43</u>			
NO BAIL <input type="checkbox"/>		Bail Amount: <u>55</u> Admin. Assessment: <u>40</u> Facility Assessment: <u>10+7</u> Total: <u>112</u>			
2. Violation _____ NOC _____ <input type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Township Code					
Description: _____					
NO BAIL <input type="checkbox"/>		Bail Amount: _____ Admin. Assessment: _____ Facility Assessment: _____ Total: _____			
3. Violation _____ NOC _____ <input type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Township Code					
Description: _____					
NO BAIL <input type="checkbox"/>		Bail Amount: _____ Admin. Assessment: _____ Facility Assessment: _____ Total: _____			
I certify (or Declare) that I have reasonable grounds/probable cause to believe and do believe that above named person committed the above infractions(s) and/or offense(s) contrary to law.					
Officer/Complainant PRINTED Name: <u>J. SCOTT</u>		Officer/Complainant [Redacted]		I.D.# [Redacted]	
Tonopah Justice Court P.O. Box 1151 Tonopah, NV 89049 482-8155		Pahrump Justice Court 1520 E. Basin, Ste. 104 Pahrump, NV 89060 751-7050		Beatty Justice Court P.O. Box 805 Beatty, NV 89003 553-2951	
<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	
You are hereby ordered to appear on _____ Day of _____ at _____ am/pm to answer the above charge(s). <u>Appear within 60 Days</u>					
Without admitting having committed each of the above infractions(s) and/or offense(s), I hereby promise to respond as directed on this notice and waive my right to be taken immediately before a magistrate (NRS 484.799 and NRS 484.893)					
Defendant's Signature: <u>Michael Brunet</u>		Interpreter Needed Language: _____		Total Bail: <u>112</u>	
Failure to comply with this complaint or future dates relating to this complaint will constitute a separate offense.					

Citation Number: 318799
 DEFENDANT NAME: BRUNET
 LAST FIRST MICHAEL
 M.I.